## Rockwall Youth Fair Scholarship Application

## Who may apply?

- Student must be a member of Rockwall 4-H Club and/or Rockwall FFA Program during the school year for which they are applying beginning in August/September prior to making application.
- Student must be eligible candidate to graduate in May/June during the year for which the scholarship is granted. If the student does not graduate the scholarship will be rewarded at the discretion of the Rockwall Youth Fair Board.
- The Scholarship will only be given to a student who will be attending an accredited college, university, vocational, or trade school.
- Selected applicants will be interviewed.

## Scholarship Guidelines:

- The scholarship will be given annually to at least one (1) student and shall be for a total of at least \$1,000.
- Proof of enrollment must be submitted for one (1) time payment of at least \$1000. Money will be sent directly to college, university, vocational, or trade school in the student's name.
- The applicant must be enrolled as a full-time student.

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I am submitting the following materials (in order listed below) as my application for the Rockwall Youth Fair Scholarships:

- Completed Application Form
- Certification by Applicant (Proof of enrollment in Rockwall County 4-H/Rockwall FFA)
- Official high school transcript

Parent/Guardian Signature

I understand that should I be a Rockwall Youth Fair Scholarship recipient and be selected by the scholarship committee I will abide by the rules set forth by the Rockwall Youth Fair Board.

| I certify that the information contained herein academic background and record. | is correct and truthfully ref | lects my personal and |
|---|-------------------------------|-----------------------|
|   |                               |                       |
| Applicant Signature   | Date                          |                       |
|   |                               |                       |
|   |                               |                       |

Date

## Rockwall Youth Fair Scholarship Application

Applications must be postmarked no later than April 11, 2025

Mail completed application to: Rockwall Youth Fair

P. O. Box 1441 Rockwall, TX 75087

| Name  |                        |                      |          |
|---|------------------------|----------------------|----------|
| Name<br>(Last)  | (First)                | (Middle)             |          |
| Address   |                        |                      |          |
| City  |                        | Zip Code             |          |
| Phone Number  | Birth D                | )ate                 |          |
| Father/Stepfather/Guardian                            |                        | <b>———</b>           |          |
|   | (Last)                 | (First)              | (Middle) |
| Employed by   | # of Years             | Position             |          |
| Mother/Stepmother/Guardian _                          |                        |                      |          |
| Mother/otephiother/odardian_                          | (Last)                 | (First)              | (Middle) |
| Employed by   | # of Years             | Position             |          |
| Address of both if different fron                     | n address listed above |                      |          |
| Father/Stepfather/Guardian                            |                        |                      |          |
| Mother/Stepmother/Guardian _                          |                        |                      |          |
| -   |                        |                      |          |
| Name of Brother(s) &/or Sister                        | (s)                    |                      | _Age     |
|   |                        |                      |          |
|   |                        |                      |          |
| Are you employed? Yes                                 | No If yes, how r       | nany hours per week? |          |
| If yes, list place of employment, address and duties: |                        |                      |          |
|   |                        |                      |          |

| Do you plan to file for financial aid with your college/university/trade or vocational school? |
|--|
| Yes No   |
| High School where you will graduate  |
| Rank in Graduating Class Number in Graduating Class  |
| SAT Test Scores: Math Verbal Total   |
| ACT Test Scores: English Math Reading Science Composite  |
| College/University/Vocational/Trade School Career Plans:                                       |
| Where do you plan to attend school?  |
| Have you been accepted?  |
| What is your preferred career choice?  |
| Why have you chosen this field?  |
| What other scholarships are you applying for and/or receiving this year?                       |
| How many immediate family members will be in college next year?                                |
| Explain how your family plans to meet school expenses:   |
| Explain any extenuating circumstances that show special need for this scholarship:             |

| ACTIVITIES:          |              |                         |              |
|----------------------|--------------|-------------------------|--------------|
| Extra-Curricular Act | ivities:     |                         |              |
| Year(s)              | Organization | Description of Activity | HRS Per Week |
|                      |              |                         |              |
|                      |              |                         |              |
|                      |              |                         |              |
|                      |              |                         |              |
| Community Service    | and Awards:  |                         |              |
| Year(s)              | Organization | Description of Activity | HRS Per Week |
|                      |              |                         |              |
|                      |              |                         |              |
|                      |              |                         |              |
|                      |              |                         |              |
| Academic Achieven    | nent:        |                         |              |
| Year(s)              | Organization | Description of Activity | HRS Per Week |
|                      |              |                         |              |
|                      |              |                         |              |
|                      |              |                         |              |
|                      |              |                         |              |
| Work Experience:     |              |                         |              |
| Year(s)              | Employer     | Brief Job Description   | HRS Per Week |

| Employer:    |
|--------------|
| Name         |
| Company      |
| Address      |
| Phone Number |
|              |
| eacher:      |
| Name         |
| Position     |
| School       |
|              |
| Adult:       |
| Name         |
| Address      |
| Phone Number |
|              |
|              |

REFERENCES: Letter of recommendation is required from each of the following:

|    | QUESTIONS: If there is not adequate space for your answers please type or print rs to questions on a separate piece of paper and number accordingly.   |
|----|--|
| 1) | Who do you feel has contributed or been the most influential person in your life and why?  |
| 2) | What experience(s) in your life has taught you a valuable lesson that you could not have learned from a textbook?  |
| 3) | What qualities do you possess that would influence an employer to hire you over someone else?  |
| 4) | List up to 5 (five) of your most significant 4-H/FFA projects, demonstrations, presentations, and/or exhibits. Describe years involved and activity related to projects, demonstrations, presentations, and/or exhibits. |
| 5) | What has been your most valued honor? Why is this important to you?  |
| 6) | Give any other information that will be helpful for the scholarship committee to get to know you.  |